

Deliverable for:  
Sustainability  
11.3 Describe the Planned Usage for the  
Enhanced Funding

New Hampshire  
Balancing Incentive Program

Workplan Submission  
October 23, 2012

## **New Hampshire Balancing Incentive Program**

### **Deliverable for:**

#### **Sustainability**

### **11.3 Describe the planned usage for the enhanced funding**

Balancing Incentive Program funds will be used to improve the system of Medicaid long-term services and supports in New Hampshire by investing in infrastructure, training, and community services and supports, with a focus on providing the right service, at the right time, in the right place.

In our preparations to submit New Hampshire's BIP application and the six-month updated work plan, we did not engage in extensive review and planning for this deliverable, as this level of detail was not required of States at those times. However, we are confident that our approach has been consistent with BIP and our efforts will continue to further the aims of enhancing the Medicaid long-term system of care, leveraging and collaborating with programs that share these goals.

All funded activities and initiatives will increase the offerings of or access to non-institutional LTSS. New Hampshire is already applying the CMS three-part requirements as a threshold review for all BIP-related activities and initiatives. Any efforts being considered that cannot satisfy these requirements will not be funded through BIP.

In New Hampshire's Balancing Incentive Program application (Dec. 2011), it was projected that the State would earn \$26,458,827 through participation through this program. This figure has not been revised and remains our projected BIP funding amount.

The accompanying spreadsheet provides a more detailed breakdown of how NH proposes to use BIP funds. These figures are subject to change over the BIP period. Possible causes for these variations including the following:

- As CMS 64 reports are filed, there may be fluctuations due to impacts from other activities, such as the implementation of Medicaid managed care (especially Step 2 for LTC & waivers approximately one year after Step 1 go live).
- The extent to which NH will be able to leverage funds from other programs is not yet clear.
  - Coordination with NH's Community Passport program (Money Follows the Person), will be addressed in the SFY 2014-2015 budget, expected to be enacted by June 2013.
  - Coordination with the recently awarded ADRC options counseling grant needs to be worked out.
  - The full extent of collaboration between BIP and NH's eligibility systems (New HEIGHTS and NH EASY) needs to be monitored as all projects advance.

New Hampshire will utilize BIP funds for infrastructure, training initiatives, and community services and supports to increase the offerings of or access to non-institutional long-term services and supports, as outlined below. New Hampshire proposes to spend \$10,450,000 for infrastructure (work plan) changes, \$5,759,810 for training initiatives, and \$10,249,017 for community services and supports initiatives. As mentioned above, these figures are all subject to change as BIP advances.

- Infrastructure

Key efforts will focus on the three required structural changes. NH will establish a “No Wrong Door” system to enable beneficiaries to access long-term care services and supports through an organization, coordinated network, toll-free phone line, or internet portal. This will leverage existing efforts to provide long-term care applicants with a single contact person to actively assist them with understanding and meeting application requirements. NH will also implement a core standardized assessment that identifies support needs and informs service planning. Third, case management practices will be improved to ensure that plans of care are created independently from the availability of funding (no financial conflict of interest), that they support person-centered planning, and that services and supports are monitored to assure that they meet the beneficiaries’ needs and achieve desired outcomes.

The development and implementation of these structural changes to NH’s system of community-based long-term services and supports will advance ongoing efforts to transform New Hampshire’s Medicaid long-term care system by lowering costs through improved systems performance and efficiency, creating tools to facilitate person-centered assessment and care planning, and improving quality measurement and oversight. These efforts will also add to the tools available to administer services and activities in the most integrated settings.

- Training initiatives in core competencies

Core competencies will be improved through the development of web-based trainings, which will enable providers, staff, families, and caregivers to utilize practices that are proven to be successful in keeping those eligible for and in need of Medicaid long-term services and supports in their communities and out of institutions.

These trainings will provide better education and improve awareness, resulting in better-informed consumers, families, caregivers, providers & agencies. Stakeholders across New Hampshire will have a clearer and more consistent understanding of Medicaid long-term services and supports and be more aware of the range of options available to meet the goal of keeping Medicaid beneficiaries in community settings to the greatest extent possible.

- Community services and supports initiatives

These initiatives are intended to go beyond required structural changes and core competency trainings to identify, develop and implement enhancements and improvements in New Hampshire's Medicaid long-term care system.

Consistent with BIP, the goal in New Hampshire is to enhance infrastructure in order to improve the system of care over the long-term. We seek to build on the strengths of our current system and providers to institute changes and improvements that will bring about long-term enhancements to keep Medicaid beneficiaries healthier and in community settings through receipt of non-institutional long-term services and supports. Stakeholders will be involved in all BIP efforts, but will play an especially key role in informing and recommending system transformation through these initiatives.

Recognizing that those who best understand the needs and see the opportunities to enhance LTSS are those who actually live and work in our communities, DHHS is accepting proposals and funding requests from stakeholders. Dozens of ideas have been submitted and many more are expected during the BIP period.

DHHS, in conjunction with the project management entity (not yet identified, pending needed NH approvals to proceed with BIP), will review and prioritize proposals. Stakeholders (who do not have a conflict of interest) will be actively engaged in reviewing proposals. The CMS 3-part test will be the threshold for review, and additional criteria will be developed for this process. DHHS will make all final decisions, utilizing the project management entity to contract and award funds, then monitor performance and outcomes for each community services and supports initiative.

While this review is anticipated to begin during the current state fiscal year, this effort will not be fully operational until SFY 2104. To maintain flexibility to adapt and adjust to changes in the LTC system, DHHS will review and award funding on a rolling basis.

All of the activities above will enhance Medicaid long-term services and supports for the benefit of Medicaid recipients in New Hampshire. They are for Medicaid-allowable purposes and none are the responsibility of another federal, state, local, or private program.